Dean//Principal Stamp & Signature EKLAHARE NASHIK

Member Of LIC

## Maharashtra University of Health Sciences, Nashik Inspection Committee Report for Academic Year 2025 - 2026

#### **Clinical Material in Hospital**

# Name of College/Institute – Matoshri College Of Nursing

### **Faculty - Nursing**

### **HOSPITAL DETAILS**

Sr. No.	Particulars to be verified	Particular	Adequate/ Inadequate
17	The Institute / College shall execute a MoU with any institute for affiliation of hospital in addition to minimum100 bedded own/parent Hospital (Affiliatedhospitalmustbe50beddedor more.) <b>To be made available on web site</b>		Adequate
a.	Whether Hospital is registered under any act under Local Authority such as Corporation, Municipality, Gram Panchayat etc.: <b>Copy to be made available on web site</b>	1	Adequate
b.	Student Bed Ratio for UG & PG to be verified:(As per MSR) Calculate at Actual – 1:3		Adequate
c.	Average Bed Occupancy in % : (Minimum 75%) : 80%		Adequate
d.	Clinical facilities for PG to be verified:-(As per MSR)		Adequate
	<ul> <li>(i) Whether OPD is functioning to be verified</li> <li>(ii) Total No of OPD (on the day of inspection)</li> <li>(iii) Average Number of patients attending OPD(current year)</li> <li>(iv) Average Number of Delivery (Current year)</li> <li>(v) Average Number of abnormal Delivery (Current year)</li> </ul>		Adequate

Here we declare all relevant document uploaded are clear and visible on web site & are true as per my knowledge & Belief Any Other, Please Specify:-

Date:-

Chairman of LIC

Member Of LIC